

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER Clark County Courier		2. DATE 9-25-24
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE \$55, \$50, \$48
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) Clark County Courier, 119 1st Ave E, Clark, South Dakota 57225		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) Clark County Courier, 119 1st Ave E, Clark, South Dakota 57225		
6. FULL NAME OF PUBLISHER: Karli Jo Paulson		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME Karli Jo Paulson		COMPLETE MAILING ADDRESS 16349 423rd Ave, Clark, South Dakota 57225
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) None.		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	1570	1559
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	350	350
2. Mail Subscription (Paid and or requested)	1030	1024
3. Paid Electronic Copies	90	85
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	1470	1459
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	0	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	20	20
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1490	1479
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	40	45
2. Return from News Agents	40	35
G. TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	1570	1559

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Karli Paulson
 (Signature)

Owner, publisher, editor

 (Title)

State of South Dakota)
 §
 County of Clark)

Sworn to before me this 25 day of September 2024
Kimberly Paulson
 Notary Public

My commission expires: 04/27/2029

(Seal)

